Psychoanalytical considerations on Ingmar Bergman’s “Cries and Whispers”

Andrea Pasqui

Abstract
The Author rereads Ingmar Bergman’s film “Cries and Whispers” not only as a representation of the process of emotions and thoughts revolving around dying, but also as a potentially transformational experience for the audience’s self that generates a profound change in how they interpret death. Psychoanalytical considerations on the film, juxtaposed with Heidegger’s concept of “being-toward-death”, comments from film critics, and reference to Ginette Raimbault’s experience of the clinical aspects of chronic and terminal disease in children, are traced back to Freud’s ideas.

Key words: Bergman, cinema and psychoanalysis, transformational experiences, psychoanalysis of dying

Alongside the other topics that it deals with (e.g. devotion and maternity, and helping the sick), Cries and Whispers is a film about preparing for the idea of dying, about the rhythms, sounds and colors of this process, and about how caregivers can go through this experience helping not only the patient they are assisting, but themselves as well. Instead of using words, the film illustrates and explains life’s final perspective, making us see it through a language of emotions, not yet in the form of ideas or concepts, that draws on the one hand from Bion’s “language of effectiveness” (Bion 1962, 1970, Grotstein 2007), and on the other from Aulagnier’s original space-function, which takes shape in the first encounter with an object, and that disruptive forces of terminal disease tend to reactivate (Aulagnier, 1975). Bergman achieved this goal by using the realism and magic of the cinema with extraordinary mastery. By allowing ourselves to be drawn on by the movement of sounds, colors, faces and words, we are led slowly back - almost unawares - to our memories of the original meanings of life and death. That is why the film is both a representation of a transformation of the ego that "effectively" cares for a person who is dying, and a transformational object (Bollas 1987) that can trigger a profound mutation in how the audience sees death.

This potential is best described in the words of Olivier Assayas (Assayas, Björkman, 1994), “Between the dream and the most trivial reality, at the boundary between life and death, it is a film in ecstasy where doors at which Bergman has knocked time and again in all his mature work suddenly burst open. It is a film that evolves, from beginning to end, in a place that cinema is generally unable to enter, a film that passes like a breath,

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pervading us - its grace and mystery remaining unsullied - then disappears without a sound, leaving the world transformed”.

We can therefore only discuss the depth and complexity of the transformational process contained in the film if we have first experienced, through its purely emotional language, the success or terrible failure that leads to the rejection and thence to the denial of the process itself. These two opposite destinies are represented by the characters’ different attitudes to the person who is dying (i.e. Anna on the one hand, Karin and Maria on the other) and they reflect different ways to adapt to chronic disease that we might see in the clinical setting, and at work within ourselves, to a variable extent.

Anna’s humility and mystical attitude are reminiscent of that “negative capability” of Bion’s that enables people, through an acceptance of the void and the non-sense of existence, to find without seeking. By abandoning any attempt to understand or find a solution, accepting the disease’s inexorable progression, Anna is able to contain the dying woman’s uncertainty and anxiety, reaching an inner state where the authenticity of dasein coincides with an acceptance of being-toward-death (sein zum Tode) (Heidegger, 1927).

Maria and Karin seem instead to reduce their involvement to a series of “present moments”, consisting of deliberate gestures, measures, actions, intentions, verbal and non-verbal interactions, typical of a reassuring practical world. As they bustle about, they genuinely share Agnes's suffering, but they fail to accept it and give it thought, so they become prey to terrifying phantoms and they ultimately flee, abandoning their sister to her destiny. The state of being anchored to the present, to the saturated and immediately definable, of rejecting the dream or latent in favor of the manifest, denying or distorting the meaning of the intense experiences relating to caring for a loved one who is dying (and that can even develop into extrasensory experiences, especially in the terminal stages) are some of the fundamental reasons why the transformational process failed in the two sisters.

In the film, we implicitly discover that any claim to explain human beings and their relational world in a set of classifiable procedures is reductive and limiting in the face of death. Bergman propels us on to take a much more profound approach. The scenes, the cries and whispers, take us back to Kant’s dynamical sublime, to remind us just how infinitely small we human beings are in the order of Nature, seen as an immensity of past and future, to Strindberg’s Inferno, and to the latent nature of dreams and what remains of them by day in the Freudian sense inaugurated in his “Interpretation of Dreams”.

For Anna, this approach to accepting and understanding another’s suffering coincides with an awareness of her own curative function and an acceptance of the frightening extraneousness of death. We can see from several scenes that this stems from the pain
she experienced over the death of her daughter and from her ability to draw from dreams.

On the topic of learning through suffering (pathei mathos), Fedida emphasizes that only the ability to dream and to refer to the dream can lead to a profound understanding of others. He quotes a passage from Jean Bollack and Pierre Judet de la Combé, drawn from their commentary on Agamemnon by Aeschylus: “The verity of an adequate (and therefore pathetic) daytime knowledge is assured by a night-time consciousness that, by recollecting past suffering, becomes suffering itself; unlike the stiffened representations of the day, the night always reactivates the pathos” (Fedida, 1992).

Another element that enables Anna to remain alongside Agnes, that can also be seen in people who care for terminally-ill patients, is the realization that she is not dying, even though a massive identification is implicit in the strong emotional link that develops with a person who is dying.

Bergman makes us see that this paradoxical situation is possible even in the case of what appears to us as a contamination by death, as “death in person”, also represented in previous films (e.g. the white clown dressed in black in the “Seventh Seal”, or the figure of Prof. Isaak Borg’s double, whose hand reaches out for him from inside a coffin in the dream involving the hearse in “Wild Strawberries”).

In Cries and Whispers, the door to Agnes’s room marks the boundary between the life that appears behind as a “previously-lived” continuum, and the death that is waiting ahead. Maria gives a hallucinatory form to her terror of merging with her dead sister by passing over the threshold, and she must consequently flee in a terrible panic, whereas Anna does not fear the encounter because she places the other’s suffering and needs before her own.

This capacity seems to stem from a harmony that is apparent in the combination of her “active life” (the procedures, rhythms and contrasts of care giving: sleeping and waking, incessant activity and rest, inside and outside the room) and her “contemplative life” (contained in the film in the “pietas” that Anna feels for Agnes, culminating in the scene when she offers her patient her breast).

The two sisters are incessantly trying instead to escape from their inner phantoms. During the night, together with the wind and the clicking of the clock, Karin also hears a disturbing presence, which takes shape in an auditory hallucination: the cries and whispers. Karin’s and Maria’s hallucinations seem to have a different quality, however, from Anna’s hallucinatory experiences.

Clinical experience with children who are ill and their parents indicates that the processes of bereavement and adaptation to chronic disease inevitably include defense mechanisms that might appear frankly pathological in other contexts. In bereavement caused by disease, the sense of loss involves the self so strongly that resorting to hallucinatory activities when faced with the disease’s unstoppable progression and the

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invasive nature of tests and treatments, with temporary improvements and relapses, and hospitalizations, sometimes appears to have a protective and cohesive role, the only way to contrast the sense of fragmentation (Raimbault, 1975). A temporary transformation in hallucinosis thus enables Anna to stay at the patient’s side and survive.

Conversely, the two sisters’ hallucinatory activity takes on a persecutory nature and drives them to flee from the disease. But it proves impossible to run away from the specter of death, because their guilty feelings in relation to their dying sister crucify them, obliging them to remain as outsiders in the magnificent villa.

Maria and Karin take care of Agnes with mixed feelings and frequent interruptions. These gaps in the rhythm of their care giving are very different from Anna’s periods of watchful repose: they carry the two sisters into other domains that seem to give them an opportunity to grasp at various perverse pleasures, as antidotes to the arrival of the terrifying specter of terminal disease; but in actual fact these pleasures are worthless. The two sisters remain entangled in a web of insincere relations of which they are only relatively aware. Before she inserts a shard of glass in her vagina, Karin says several times: “It’s but a tissue of lies. All of it”. Her perception of the falsity of her life makes her feel so profoundly empty and non-existent that only her self-inflicted injury and exposing it to her husband can contain them. She causes herself pain to be sure that she exists.

According to Heidegger (ibid), when human beings feel that they are not authentic, they see themselves as a set of worthless instants; it is a timeless being. But when being accepts the temporal dimension of life, the final prospect becomes being-toward-death, and it regains that profound sense of authenticity that Agnes and Anna feel.

And yet, as Freud warns, this long process of preparing for death cannot take place without compromises and mixed feelings (Freud). Being emotionally involved in the disease and death of a loved one means acknowledging one's own death and implies both accepting the dual sentiment of love and hate for the person who is dying, and abolishing the sense of one's own life being cancelled. This is the moment that generates the idea of a life beyond, of our demons (in the sense of the dead who return to haunt us because they were ill-treated), and also of the angels who watch over us.

In fact, Agnes returns at the end of the film, in the minds of the survivors, transformed into a revenant (Arecco, 2000).

For Zemignan, this transformation into a ghost represents the long course of dying that leads Agnes to a sense of peace of heart (Zemignan 2009). The author essentially sees Agnes’s slow, drawn-out death as a final, vital process of subjectivization (or what we might also call sense-making), that disease and the anxiety of feeling death near tend to undermine. In act, the dying Agnes regains her sense of self through a sensory experience similar to what happens in the newborn at the beginning of their life. This only happens for Agnes through her relationship with another, when the void separating her from Anna is filled, when she abandons herself on her caregiver’s skin-breast.
Zemignan put it, “It is only by filling this sensory void that we can ultimately go on from a perception of others to a relationship with them, thanks to which we can find ourselves”.

Using the image of the perforated container, and of the vital substance draining through its holes, Bion (Grotstein, 2007) illustrates one of the most frightful effects of the anxiety of death. Thanks to her contact with Anna’s skin, Agnes can retrieve this substance and we can imagine that the para-excitatory function and the psychic envelope that form integral parts of the skin-ego are restored (Anzieu, 1985).

Two paths open up before the film comes to an end, after Agnes has died and been transformed into a ghost, after we have seen Anna’s pietas and Maria’s hopelessly unsuccessful attempt to feel close to her dead sister.

The first sees Maria and Karin return to their previous routines, abandoning any attempt at reconciliation, hurriedly saying goodbye to Anna and denying the value of her contribution (Anna is just a “carer”), thereby also denying the sense that Anna had given to Agnes's life, that had guaranteed the continuity of her existence before she died, had become the very essence of the sick woman’s life; even the words of the priest who stood before Agnes's body and desperately called upon God, as in “Winter Light”, asking Him to give a sense to our life, seem to go unanswered.

This loss of sense coincides with a sort of mental death and is apparent in the last conversation between the two sisters. Karin attempts to make affectionate contact with Maria, but Maria shrinks back annoyed and says, “What are you getting at?”, at which Karin, after a moment’s hesitation, answers, “Nothing”.

The second path appears in the final scenes and takes the completely opposite direction. After hearing the notes of Chopin’s mazurka, and Anna’s voice fading into Agnes’s, we see the four women dressed in white in the park outside the villa, serene and reconciled in a beautiful atmosphere of light. Perhaps this is the image that forms and remains in Anna’s mind, the recollection of a future potential. Perhaps it is an image shared in the minds of all four women. Perhaps it is the dream of a possible reality in another dimension that comforts us, giving us something to hold onto, enabling us to mourn our dead.

Be that as it may, once the process of death has come to completion and peace has returned, switching to the only possible form of fusion that passionate love attempts to achieve in life, without ever succeeding, is unavoidable.

The words of Manoel de Oliveira come to mind, when he was commenting on his extraordinary film “The Letter”: on the topic of love between couples he said, “Absolute love consists in becoming totally detached from everything, living exclusively for that man or woman, but this is impossible because it is a totalizing desire. In a great passion there is even no desire to have children, only the desire to absorb the other. The two want to become one. But this is possible only in death”.

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Rai Sat Cinema World (1999) Intervista a Manoel de Oliveira [interview with Manoel de Oliveira]. extras in the movie CD

“The Letter”.


Andrea Pasqui, M.D., psychoanalyst, associate member of Italian Psychoanalytic Society and International Psychoanalitical Association, pediatrician, child psychiatrist and psychotherapist.
Adjunct professor in Child Psychiatry and Psychotherapy, Postgraduate Schools of Pediatrics and Child Psychiatry University of Padua.
Scientific Curator of Italian Psychoanalytic Society website SPIWEB.

Translated by Frances Coburn